

Double Income Fund

Fund of the Registered Alternative Investment Fund Manager (AIF) Double Income Management B.V.

Attention! This investment falls outside AFM supervision. No license and no prospectus required for this activity.



Subscription Form

Subscription procedure



Submit your
subscription



Your subscription is
being processed



Make your
initial deposit



You are a participant
of the fund

With this form you can subscribe as a participant of the Double Income Fund.



The details in this form are required to process your subscription and will be shared with AssetCare Fund Services, the administrator of the fund. They take care of your subscription and will contact you in case additional information is necessary.

Do you have any questions while completing this form? Please do not hesitate to contact the administrator on [+31 \(0\)20 244 00 92](tel:+31202440092) or info@assetcarefunds.com.

Information about Double Income Fund

The documents below give insight into the characteristics of the fund, such as the investment policy and the risks.

Please read through the documents carefully in advance and subsequently store them. Click on the icon below to open the respective document.

Information
memorandum



Key Investment
Document



Details of participants

Please enter your information in the table below.

	First participant	Second participant ¹		
Company name ²				
Full name				
Email address				
Phone number				
Address ³				
Postal code ³				
City ³				
Country of residence ³				
Nationality				
Date of birth				
Which country/countries are you liable to pay taxes in? ³				
Employment	Self-employed	Employed	Self-employed	Employed
	Retired	Student	Retired	Student
	None		None	
Profession ⁴				
Name employer ⁴				
Location of employer ⁴				
Sector ⁴				

¹Only required in case of a joint subscription.

²Only required in case of a corporate subscription.

³Fill in the details of the company in case of a corporate subscription.

⁴Fill in the details of your last profession if you currently do not have a profession.

Subscription

The minimum initial subscription amount is €100,000. Please indicate what the subscription amount will be and from which account the deposit is made.

Subscription amount

€

IBAN

Account name

Note: the account name must be the same as the name of the participant.



In accordance with the Information Memorandum, units are allocated at the net asset value of a unit value on the first possible participation day of entry.

The fund its participation day is every first possible business day of the month. after the subscription is processed, a confirmation is sent with a new overview of your units.

Instructions of the initial deposit

A confirmation email is sent in case the initial deposit can be realized. For reasons of convenience, the following table contains the relevant information to make the deposit.

IBAN	NL18 BUNQ 2035 1697 39
Account name	Stichting Double Income Fund
Description	Participant name(s)
Bank Identifier Code (BIC)	BUNQNL2A
Address	Naritaweg 131-133 1043 BS Amsterdam The Netherlands

Statement Source of Funds and Wealth

The Money Laundering and Terrorist Financing (Prevention) Act (Wwft) requires fund managers to, amongst others, identify their participants, report unusual transactions and have insight in the source of funds. There is also an obligation to keep participant files up to date. For these reasons, we kindly ask you to fill out the information below.

The administrator will contact you in case additional (proof) documentation and/or information is required.

Do you expect to make multiple deposits?	Yes	No
--	-----	----

If so, can you explain this further (frequency and expected amounts)?

Do you expect to make interim withdrawals?	Yes	No
--	-----	----

If so, can you explain this further (frequency and expected amounts)?

Source of funds⁵

Work	Property	Inheritance/Gift	Pension benefits	Other
------	----------	------------------	------------------	-------

Can you substantiate the source of funds that are used for the subscription?

In order to process your subscription orderly and quickly, we kindly ask you to provide a detailed description.

⁵Please see www.assetcarefunds.com/inschrijving for more information.

General

The following questions are to gain further insight into your subscription.

What is your connection with the fund (manager)?

Do you qualify as a PEP (Politically Exposed Person)?	Yes	No
Are you a U.S. Person?	Yes	No



For additional information about PEPs, US Persons and (Pseudo) UBO(s), please refer to:

www.assetcarefunds.com/inschrijving

Statement of (Pseudo) Ultimate Beneficial Owner(s) (UBO(s))⁶

Does the entity have one or more UBOs with an interest of 25% or more?	Yes	No
--	-----	----

If yes, please complete the following information:

Name	Direct interest (%)	Indirect interest (%)
1		
2		
3		
4		

If no, please indicate who is/are considered to be Pseudo UBO(s)?

1	2	3	4
---	---	---	---

⁶Only required in case of a corporate subscription.

Required documentation

In order to complete the application, at least the documents below are required:

Individual or joint participant

A fully completed subscription form

A proof of identity (passport or ID)⁷

A copy of a recent bank statement showing the IBAN (account number), account name and address⁷

⁷Required for both participants in case it is a joint application.

Corporate participant

A fully completed subscription form

A proof of identity (passport or ID) of all directors, signatories and (Pseudo) UBO('s)

A copy of a recent bank statement showing the IBAN (account number), account name and address

Recent extract from the Chamber of Commerce

Organization chart of the shareholders

Articles of association of the entity

Shareholders register



Note: Additional information or documentation may be required at the request of the administrator to fully process the registration. This may include for instance a document to substantiate the source of funds.

Signature

By signing the subscription form you declare:

- that you have completed the registration form truthfully and that you will notify the Fund of any changes to your details which are of importance to the Fund;
- that you have read the Information Memorandum and the Key Information Document (KID);
- to accept the applicability of the Information Memorandum and the Key Information Document (KID);
- to expressly agree that any amendments to these documents in the future will be made available to you digitally;
- to understand and accept the risks associated with investing in this fund;
- to expressly agree that the information in this fund is processed by the fund manager and the administrator in accordance with their respective legal obligations to provide the respective services;
- to be aware that the fund is not subject to the supervision of the AFM because Article 2:66a of the Financial Supervision Act applies.

The information in this form will be used to process your subscription, to enter into and to execute the contract. We cannot execute the agreement in case your data is incomplete and the documents required for the application are missing.

AssetCare Fund Services will use your e-mail address and telephone number to contact you in case the required documents are missing and/or your application form is not fully completed.

Date	Date
Name first participant	Name second participant (if applicable)
Signature	Signature

Submit your subscription

Please send a signed form to info@assetcarefunds.com or send it by regular mail to the administrator. Subsequently, your subscription will be processed of which you will be notified by e-mail.



Submit your
subscription



Your subscription is
being processed



Make your
initial deposit



You are participating in
the fund

Do you have any questions about your subscription? Please feel free to contact AssetCare Fund Services:



+31 (0) 20 244 00 92

Available each working day from
08:00 to 18:00



info@assetcarefunds.com

Our aim is to answer your email
within 24 hours



AssetCare Fund Services

Eurocenter I, 7th floor
Barbara Strozilaan 310
1083 HN Amsterdam

The Fund Manager and Administrator protect the privacy of its unit holders. All privacy-sensitive information provided to us is subject to the [privacy statement](#). The Fund Manager and Administrator make reasonable efforts to keep this information confidential and to use it only for the purposes described in the [privacy statement](#). The Fund Manager and Administrator work in accordance with the Dutch privacy legislation (AVG). In order to perform a subscription, the Fund Manager and Administrator need some information such as name, bank account and email. We may also use these details to keep you, as participant, informed of developments in the fund or to send you other information which may be of interest. You decide for yourself whether you want to participate. You may change your choice at any time.

The Fund Manager or Administrator will not disclose Unit holders' information to third parties other than the parties listed in the Information Memorandum without permission, unless otherwise required by law.

The Fund Manager and Administrator reserve the right to modify the [privacy statement](#) in the event there are changes in the policy or business operations or in case law or case law warrant it.

In case you have any questions or comments about the [privacy statement](#), please do not hesitate to contact us at info@assetcarefunds.com.